

Indiana Regulatory Occupations Evaluation Committee Minutes of the October 12, 2011 Committee Meeting

Call to Order & Establishment of Quorum

The Regulatory Occupations Evaluation Committee (ROEC) meeting was called to order on Wednesday, October 12th in the Government Center South Conference Room W064 at 9:00 a.m.

Committee members present:

- John Graham, Committee Chair
- Barry Boudreaux
- Gloria Downham
- Frances Kelly
- Dave Miller
- Sally Spiers
- Rita Springer

IPLA staff members present:

- Gale Albright
- Marty Allain
- Lisa Bentley

Review and Approval of Minutes

The September 21, 2011 minutes were reviewed and unanimously approved by committee members.

Presentation of “Part B” Assessment for Committee of Hearing Aid Dealer Examiners, Allen Reese, Board Member

Allen Reese, Board member for the Committee of Hearing Aid Dealer Examiners presented Part B to the committee (attached hereto as Exhibit A) the following information highlights what was contained in that report:

- a. Proactive Surveillance
- b. Complaint Process & Nature of Complaints
- c. Effectiveness of Current Regulation – Reduced Consumer Harm
- d. Appropriate Regulatory Mechanism & CE Requirements

- e. Affects of Regulatory System
- f. Adequate Resources/Fees vs. Adequate Regulation

Mr. Reese presented the following recommendations to the committee:

- Recommendation #1 – Grant the committee the authority to serve as the hearing officer in disciplinary actions brought by the Office of the Attorney General (OAG) against HAD professionals.
- Recommendation #2 – Grant the medical board (or the committee) the ability to order restitution to a person who suffered damages as result of conduct or omission on the part of a HAD professional that is the basis for a disciplinary sanction.
- Recommendation #3 – Require that HAD professionals place a clause in all sales contracts notifying the purchaser of a hearing aid that he or she has a right to file a consumer complaint with the OAG's office for any alleged misconduct involved in the fitting or sale of the hearing aid.
- Recommendation #4 – Institute a fee for HAD applicants to sit for the practical examination.

Committee Member: Stated that a summer study committee had previously made recommendations HAD be combined in with the Speech, Language and Audiology Board. She further explained that if this was done then HAD members could then be responsible for the discipline of their own licensees.

Mr. Reese: Replied that he knows that this was attempted in Minnesota but the board members were staggered in such a way that it was not equitable for the Hearing Aid Dealers. Reported infighting within the board caused many problems and concerns for those individuals attempting to pass the tests.

Committee Member: Questioned Mr. Reese why he felt there were such a small number of complaints. He also questioned him about what percentage of the hearing aids being sold in Indiana would have malpractice complaints filed if citizens did file.

Mr. Reese: Responded that the majority of hearing aids are being fit for the elderly and they fear reprisals. He explained that most of these individuals are not even aware that there is a complaint process through the OAG's office. Currently many of the complaints are coming from other dealers who end up seeing these individuals in an attempt to get them fitted with a proper hearing aid. He feels that perhaps 2% of those sold would end up receiving a complaint being filed if people knew the process.

Committee Member: Mr. Reese was asked if he felt that the recommendations listed in the report would help with the consumer complaint process.

Mr. Reese: Replied affirmatively that he felt these recommendations would go a long way toward helping individuals understand their options.

Presentation of “Part A” Assessment for Indiana Optometry Board, Douglas Morrow, O.D., Board Chair

Douglas Morrow, Board Chair for Indiana Optometry Board presented Part A to the committee (attached hereto as Exhibit B). Information from that presentation is listed below:

- **Introduction of Optometry Board**

On March 9, 1907 the Indiana General Assembly approved an act in order to establish the State Board of Registration and Examination to define and regulate the practice of optometry. On May 1, 1977 Optometrist began receiving licenses in the place of the previously issued certificates.

The board issues three authorities: Optometry License, Optometric Legend Drug Certificate and a Limited License.

- **Types of Harm & Severity of Harm**

The types of harm and severity can include but not be limited to Glaucoma, Retinal Detachment, Cataracts, Bacterial Conjunctivitis (Pink Eye), Uveitis and Corneal Ulcer.

- **Current Regulation and Alternatives**

Violation- under IC 25-24-1-18, a person who violates this chapter of the Indiana Optometry Board statutes without possessing a valid license commits a Class B misdemeanor.

Cease and Desist Order - under IC 25-1-7-14, the Indiana Optometry Board may file a complaint with the attorney general if it believes that a person who is not licensed is engaged in activities for which a license is required.

Unlawful Contact Lens Dispensing – A person who dispenses a contact lens, including a contact lens without corrective power, to an individual who does not have a prescription for the contact lens being dispensed commits a Class A infraction.

Committee Member: Asked for an explanation as to the difference between a certificate and a license.

Mr. Morrow: Replied that requirements for licensure are more intense, and a license holds more authority.

Committee Member: Mr. Morrow was asked to describe part III of the clinical skills required during the licensing exam.

Mr. Morrow: Responded that at the end of a student's second year he or she should be able to look at the eye with instrumentation and diagnose any eye problems. It would be considered a physical exam.

Committee Member: Asked if there is any desire within the optometry community to use medications that can be injected due to the fact that they are currently not allowed in Indiana.

Mr. Morrow: Replied affirmatively that this is the desire and stated also for controlled substances. An example of why this is needed would be if a patient came into the office on a Friday evening with a farm related eye injury. Unfortunately, they have no way to help diminish the pain in this individual prior to Monday unless going to an emergency room.

Committee Member: Questioned Mr. Morrow if he was aware of other countries in the world that require their optometrist to be licensed and are governmentally regulated.

Mr. Morrow: He replied that professions practice differently throughout the world and he is aware that IU is putting together a program in Singapore. He is fairly certain that the European countries require licensing. He further stated that more states are respecting other state licenses across the board.

At this time the committee discussed the handout entitled Part A Analysis: the Case for Retention of Existing Boards and Professional Licensing Activities. Questions arose as to whether or not question 3 is having a profound effect upon the overall scoring. Chairman Graham asked Gloria to create a spreadsheet removing question 3 and placing an influence measurement on each of the questions so the committee may review the percentages again. Gloria will send this information out to the committee via email.

Chairman Graham asked the committee if they felt they were giving the same degree of care on questions 1-5 as with question number 6. Frances Kelly said that she feels the committee is exercising more care and being more cautious the further along into this process they go.

The thought was posed that if the legislature does not agree with any of the ROEC recommendations to do away with licensing or certification, whether there should be some type of process in place to help streamline and assist the boards. The committee came to no conclusion at this time.

Presentation of “Part A” Assessment for Indiana Dietitian Certification Board, Cherry Chanley, Board Member

Cherry Chanley, Board Member for Indiana Dietitian Certification Board presented Part A to the committee (attached hereto as Exhibit C). Information discussed during that presentation is listed below:

- Introduction of Dietitian Certification Board
Ms. Chanley read the following statement from the former US Surgeon General Kenneth P. Moritsugu. “Dietitians are credible and recognized experts in food and nutrition and diet. Their knowledge, skills and science base help policy makers make better decisions for the public good.”
- Types of Harm & Severity of Harm
Samples cited were diabetic amputation, diabetic wounds and cost of nutrition related conditions.
- Current Regulation and Alternatives
- Alternatives to Regulation

Committee Member: Asked if there is a difference between the educational requirements of dietitians and nutritionalists.

Ms. Chanley: Responded that dietitians are required to have educational backgrounds and must have a baccalaureate degree or 1200 hours of internship or a pre-approved program experience. They must also pass the national exam. Anyone can call themselves a nutritionalist.

Committee Member: Inquired as to where the majority of dietitians work and who pays for these services.

Ms. Chanley: Replied that they work in long term care facilities, health care facilities and hospitals. Often times Medicare will pay for a dietitian’s services. Sometimes a dietitian will work in private practice and this would be paid by the patient.

Committee Member: Wanted to know the percentage of dietitians in private practice in Indiana.

Ms. Chanley: Speculated that less than half because many work in healthcare facilities.

Committee Member:	Asked what associations within Indiana and the country help govern dieticians.
Ms. Chanley:	Answered that Indiana Dietetic Association helps verify continuing education opportunities but they do not sanction or monitor individuals. There is a national annual convention each year of approximately sixteen hundred (1600) members.
Committee Member:	Inquired about the continuing education requirements.
Ms. Chanley:	Reported that thirty (30) continuing education units (CEU) are required every 2 years in Indiana, but nationally only 75 are required every 5 years. She further stated that she feels it is difficult for the public to file complaints against dieticians because of their poor visibility.
Committee Member:	Inquired how many complaints have been filed to date.
Dave Miller:	Stated that he will get this information to the board.

Findings and Recommendations for Committee of Hearing Aid Dealer Examiners

Barry Boudreaux offered to write up the HAD review for the committee. Discussion ensued regarding the recommendations made by the HAD Examiners. Mention was made that many of the health related board should all be housed together under the same agency.

Review of Drafts for Year-End Report

At this time the committee discussed the recommendation reports regarding Executive Summary, Cosmetology & Barber Board, Health Facility Administrators Board, Private Investigator & Security Guard Board and Professional Engineers Board. Due to the fact that these recommendations are not finalized they will not be included in these minutes.

Adjournment

Chairperson Graham adjourned the meeting at approximately 2:50 p.m.

Dean John Graham, Chair

Date

Indiana Regulatory Occupations Evaluation Committee

Next Scheduled Meeting:

November 16, 2011

9:00 a.m.

Indiana Government Center South

Room W064 of the Indiana Professional Licensing Agency